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# **POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM**

Application Number	US Nat. Phase of PCT/GB2005/001109
Filing Date	
First Named Inventor	McGeough, et al.
Title	Closure With Integral Gas Barrier
Art Unit	
Examiner Name	
Attorney Docket Number	44257.0005

I hereby revoke all previous powers of attorney given in the above-identified application.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	14 JUL 2006
Name	Henning von Spreckelsen	Telephone	+44 1483 275847
Title and Company	Managing Director		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.

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